

**Health Workforce Pilot Projects Program**  
**Interview with**  
**Trainees**  
**171—07-100**  
**Los Angeles, California**

| Interview Elements  | Comments/Notes  |  |   |   |                       |   |
|---|---|--|---|---|-----------------------|---|
|   | BRN   | MBC  | Assoc. of Reproductive Health Professionals | American College of OB-GYN, District IX | Technical Consultants | OSHPD-HWPP  |
| <b>Employment History: The Trainee's Role as a Certified Nurse Midwife, Physician Assistant, Nurse Practitioner</b>   | T – 744   | T -744   | Not Present                                 | Not Present                             | Not Present           | T -744  |
| 1. How long have you been licensed/certified as a practitioner?   | Over 25 years of experience in women's health   | Physician Assistant with 25 years of experience.             |   |   |                       | The first Physician Assistant in the pilot project. She has 25 years in health with experience in pap smears, IUD insertions, pre-opt, and ultrasound.                      |
| 2. What inspired you to become a practitioner?  |   |  |   |   |                       |   |
| 3. How long has your practice involved providing services related to maternal and child health, abortion care, miscarriage management care? (Discussion regarding services provided.)   | Harbor General-received PA  | Full service/full circle OB rotation at Harbor Health.       |   |   |                       |   |
| 4. What inspired you to become a part of this pilot project?  |   |  |   |   |                       | Received her training as a PA at Harbor.  |
| <b>New Role: As a Trainee in this Extended Capacity:</b>  |   |  |   |   |                       |   |
| 1. Do you feel comfortable in your new role?  | Has completed 100 procedures. Will continue practice and collect data on another 50 procedures. | Yes  |   |   |                       | As of last week, she has completed 100 cases  |
| 2. Do you feel competent to perform the new skills you have learned?  |   | When it doesn't feel easy, she asks for help                 |   |   |                       |   |
| 3. Are you expected to perform tasks that you were not trained to do?   |   |  |   |   |                       | She felt most comfortable after 40 procedures   |
| 4. Could you comment on the course content during your didactic and clinical training phases?   | Would with T-30 (preceptor). Felt comfortable after 40 procedures.                              |  |   |   |                       |   |
| 5. Was the time allocated for training sufficient for your comfort level/your competency level?   | Calls MD when she feels the procedure isn't easy to perform.                                    |  |   |   |                       |   |
| <b>Clinical Experience:</b>   |   |  |   |   |                       |   |
| 1. How are the patients assigned to you? How many thus far?   | CRNA provide the sedation when she does the procedure.  | After 40 cases, felt clear on looking at tissues.            |   |   |                       | When performing procedures, most are easy for her. However, when she gets a gut feeling that there is a complication or does not feel comfortable, she calls the preceptor. |
| 2. Were the services that you provided related to: miscarriage management, abortion care, other maternal care? Discuss  |   |  |   |   |                       |   |
| 3. Are you the sole trainee providing the service to an individual patient or is their another trainee assigned to work with you? If another trainee is assigned to work with you, discuss who the primary trainee provider is and how that is determined? What is the shared responsibility? | Has had experience in inserting IUDs.   | Nurse Practitioner Anesthetist new skill sets with training. |   |   |                       | She knows her limitations and has had zero complications.   |

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| 4. What responses do you get when asking the patient to sign the consent form? Is their acceptance after the explanation? If the patient declines to sign, what happens next?<br>5. Have there been instances when patients are reassigned/changed and given to a non-trainee practitioner? Discuss.<br>6. Do you administer any medications? If so, what type/purpose of the medication?<br>7. Have there been any complications in providing your service?<br>8. Have you provided any care during the post discharge period to one of your patients? After care to a patient who was discharged home? Follow-up care? | No. Medication is provided by the CRNA<br><br>No complications during the 100 procedures |     |   |   |                       | She indicates that the CRN anesthetists gives the IV meds<br><br>Patients have a choice of deep sedation, medium or surgical block. 12 weeks gestation 70% ask for the sedation.<br><br>Protocols reflect different levels<br><br>New skills acquired are aspirations and re-aspirations, endometritis biopsies. She has performed 1 or 2 re-aspiratons, also identification of tissue as different<br><br>She has not seen any post recovery follow-up for her clients...others have come in for her consultation. |
| <b>Records Management</b><br>1. Where are the signed patient consent forms kept?<br>2. Is this the same place where patient records are stored: During clinic hours? After hours?<br>3. Do you keep a log of patients seen as part of your employment/utilization record?<br>4. Have you had a chance to review the patient questionnaires? If so, what were your findings?<br>5. What other records do you manage\maintain?   | The clients are assessed and counseled before the procedure by the admissions person.    |     |   |   |                       | The Research Coordinator is responsible for data entry into the e-files. She is also involved in the follow-up surveys.   |

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| <b>Relationship of the Employment/Utilization Experience to the Didactic/Clinical Rotation Course and Expected Project Outcomes:</b><br>1. Now that you have had some experience in abortion care et.al, do you have any suggestions to modify the course content (that would provide better preparation)?<br>2. What are your expectations regarding the outcome of this project?<br>3. Are there any other comments, or information you would like to share with us? | During didactic, would have liked to have had a CD on the identification of products of conception. Felt competent in identifying products of conception after the 40 procedures. |     |   |   |                       | Would like to have a CD on products of conception included in the training phase. |